

FAX**RECEIVED
CENTRAL FAX CENTER**

APR 06 2005



CNH America LLC
Intellectual Property Law Department
Administrative Offices
700 State St.
Racine, WI 53404
Phone: 262-636-7039
Fax: 262-636-6231

To:	ATTN: MAIL STOP RCE	From:	Brant T. Maurer, Esq.
Co:	United States Patent and Trademark Office	Date:	April 6, 2005
Fax #:	703-872-9306	#Pages:	23 (including cover page)
Re:	U.S. Patent Application No. 10/619,972	Atty. Docket	12622
		No.	

Urgent **For Review** **Please Comment** **Please Reply** **Please Recycle**

The return receipt automatically sent via facsimile will acknowledge the following attachments to this cover page:

- Fee Transmittal
- Request for Continued Examination Transmittal
- Copy March 15, 2005 Response to Provoke Advisory Action = "Submission"

CONFIDENTIALITY NOTICE

The information contained in this facsimile transmission is privileged or confidential information intended only for the use of the individual or entity named above. If the reader of this message is not the intended recipient, you are hereby notified that any dissemination, distribution or copying of this facsimile is strictly prohibited. If you have received this facsimile in error, please notify us immediately by telephone and return the original to us via the postal service, if authorized by us, destroy it.

Doc Code:

PTO/SB/17 (12-04v2)
Approved for use through 07/31/2006. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2005		Complete If Known	
		Application Number	10/619,972
		Filing Date	July 15, 2003
		First Named Inventor	Robert A. Matousek
		Examiner Name	Alicia M. Torres
		Art Unit	3671
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Attorney Docket No.	12622
TOTAL AMOUNT OF PAYMENT (\$)		\$790.00	

METHOD OF PAYMENT (check all that apply)

Check Credit Card Money Order None Other (please identify): _____

Deposit Deposit Account Number: 03-1025 Deposit Account Name: CNH America I.I.C

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

- Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee
- Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.16 and 1.17 Credit any overpayments

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

FEE CALCULATION**1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	<u>FILING FEES</u>		<u>SEARCH FEES</u>		<u>EXAMINATION FEES</u>		
	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee Paid (\$)</u>
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXCESS CLAIM FEESFee Description

Each claim over 20 (including Reissues)

<u>Fee (\$)</u>	<u>Small Entity</u>
50	25
200	100
360	180

Each independent claim over 3 (including Reissues)

<u>Fee (\$)</u>	<u>Multiple Dependent Claims</u>

Multiple dependent claims

<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>

$$\begin{array}{l} \text{Total Claims} \quad \text{Extra Claims} \quad \text{Fee ($)} \quad \text{Fee Paid ($)} \\ - 20 \text{ or HP} = \text{ } \times \$50.00 = \$0.00 \\ \text{HP} = \text{highest number of total claims paid for, if greater than 20.} \end{array}$$

$$\begin{array}{l} \text{Indep. Claims} \quad \text{Extra Claims} \quad \text{Fee ($)} \quad \text{Fee Paid ($)} \\ - 3 \text{ or HP} = \text{ } \times \$200.00 = \$0.00 \\ \text{HP} = \text{highest number of independent claims paid for, if greater than 3.} \end{array}$$

3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listing under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

<u>Total Sheets</u>	<u>Extra Sheets</u>	<u>Number of each additional 50 or fraction thereof</u>	<u>Fee (\$)</u>	<u>Fee Paid (\$)</u>
- 100 =	/ 50	(round up to a whole)	x \$250.00	= \$0.00

4. OTHER FEE(S)

Non-English specification, \$130 fee (no small entity discount)

Other (e.g. late filing surcharge): Request for Continued Examination

\$790.00

SUBMITTED BY

Signature	<i>Brant T. Maurer</i>	Registration No. (Attorney/Agent)	53,285	Telephone	262-636-5368
Name (Print/Type)	Brant T. Maurer		Date	April 6, 2005	

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-0199 and select option 2.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REQUEST
FOR
CONTINUED EXAMINATION (RCE)
TRANSMITTAL**

Address to:
Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

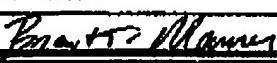
<i>Application Number</i>	10/619,972
<i>Filing Date</i>	July 15, 2003
<i>First Named Inventor</i>	Robert A. Matousek
<i>Art Unit</i>	3671
<i>Examiner Name</i>	Alicia M. Torres
<i>Attorney Docket Number</i>	12622

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application. Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 CFR 1.114** Note: If the RCE is proper, any previously filed unentered and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).
- a. Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
- i. Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- ii. Other _____
- b. Enclosed
- i. Amendment/Reply iii. Information Disclosure Statement (IDS)
- ii. Affidavit(s)/Declaration(s) iv. Other Copy of 03/15/05 Response to Prov. Adv. Act.
2. **Miscellaneous**
- a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)
- b. Other _____
3. **Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.
- a. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No. 03-1025
- i. RCE fee required under 37 CFR 1.17(e)
- ii. Extension of time fee (37 CFR 1.136 and 1.17)
- iii. Other _____
- b. Check in the amount of \$ _____ enclosed
- c. Payment by credit card (Form PTO-2038 enclosed)

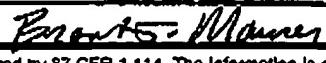
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print / Type)	Brant T. Maurer	Registration No. (Attorney / Agent)	53,285
Signature			
Date	April 6, 2005		

CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner For Patents, P.O. Box 1450, Alexandria, VA 22313-1450 or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Name (Print / Type)	Brant T. Maurer
Signature	
Date	April 6, 2005

This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing the burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.